

## United States Environmental Protection Agency National Clean Diesel Rebate Program Rebate Application

OMB N	Number:	2060-0686
Expiratio	n Date:	10/31/2015

			Fundi	ng Year		Target Fleet		2	Reb	ate Type				
/pr	olicant Information													
0	rganization Name Mar	tel Trar	nsporta	tion										
Α	ddress 140 Powderm	ill Road	<u></u>			Photo and a second a second and	* 1.********** * A.A****							
С	ity Canton			Co	unty/Parish	Hartford		State	СТ	ZIP 0	6022			
E	mployer/Taxpayer No. (E	IN/TI												
Pri are	ligible Entity Information vate fleet owners are able to a currently contracted or leased insportation or air quality. For a	pply for full to an elig	nding from	the Natio	onal Clean Diese ble entity is a fee	el Rebate Program if t deral, regional, state,	local, or	r tribal agend	cy or port a	uthority with i	urisdiction	requested,		
	Eligible Entity Type		Eligible	Entity	Name			Eligible I	Entity Lo	cation (Co	unty, Si	ate)		
	Local Govt/Agency		Canto	n Publ	ic Schools			Hartford	d Count	у, СТ				
)riç	I certify the fleet of private fleets as diginal Vehicle									u o roquii				
	Vehicle Identification Number	Engine Model Year	Gross Vehicle Weight	Vehicle Class	Engine Manufacture	Engine Family r Name	Annu Mile:	la la	Annual Idling Hours	Location Operation County		Rebate Amount*		
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4														
5										a company of a facility gar open a groups of Peters lates, Ann Sale				
Т.		Total Funds Requested 20.00							30,000					
X X	Yes Does your school transportation provider have an idle reduction policy?  I certify that the vehicle(s) listed for replacement are operational and meet the eligibility requirements defined in the Program Guide.  I certify that the vehicle(s) listed for replacement will be properly disposed of according to the requirements defined in the Program Guide.								*Please see the Program Guide for eligible rebate amounts					
þþ	olicant Signature													
Ş	By signing, I certify the knowledge. If select													
	unding for the National C uide for additional fundir			bate Pre	ogram is sub	ect to continuing	g fede	ral approp	oriations	Please so	e the F	Program		
PA	Form 5600-260 (9-14)													